



Hattiesburg Public Schools

301 Mamie Street
Hattiesburg, MS 39401
Phone: 601-582-5078
Fax: 601-583-7339

2022 ARP ESSER SATURDAY TUTORIAL APPLICATION ACT PREP CAMP

(Please complete and return to your child's designated school immediately)

Student's Last Name: _____ Student ID#: _____

Student's First Name: _____ Grade: _____

Phone(s): _____ Email Address: _____

Home Address: _____

Does your child need transportation? Circle: YES or NO

Bus Pick up/Drop Off Address: _____

Lunch is provided. List any food allergies: _____

Parent/Guardian Permission

I hereby give permission for my son/daughter: _____ to
(print student name)

participate in the ARP ESSER *Saturday ACT Prep Camp planned for grades 9-12*. I understand this FREE program will be held on scheduled **Saturdays 9:00 a.m. - 12:00 p.m.** and my student is expected to participate daily. ACT Prep Camp dates are **January 29 and February 5, 12, 19, 26**. Lunch is provided at no cost to students. **Parents must transport students for the January 29 session.** For the month of February sessions, Hattiesburg Public Schools bus transportation is available to and from the program. *However, if a student needs bus transportation, this application must be submitted as soon as possible - no later than Monday, January 31.*

By signing this form, I also agree to support and encourage my son/daughter's regular attendance to all programs in which he/she is enrolled.

Print Parent/Guardian Name: _____

Signature: _____ Date: _____

Print Student Emergency Contact Name: _____

Emergency Contact Phone Number(s): _____



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2022 ARP ESSER AFTERSCHOOL/SATURDAY TUTORIAL

ACT PREP CAMP STUDENT EXPECTATIONS

- All school rules and policies apply during the *ARP ESSER Saturday ACT Camp*.
- Students are encouraged to attend the Saturday camp when scheduled.
- Students must be on time for the start of each program period.
- Students must be in their assigned area during program hours and may not leave campus at any time without a parent/guardian dismissal.
- Unacceptable behavior and failure to follow program rules (including on the school bus) may result in disciplinary action and possible dismissal from the program.

By signing below, I agree to comply with the rules above and understand that I may be dismissed from the program at any time, should I fail to follow the school rules.

Print Student Name: _____ **Date:** _____

Student Signature: _____ **Date:** _____